

INSPECT ZERO REPORTING USER GUIDE

www.in.gov/inspect

Email: inspect@pla.in.gov



LOGIN PAGE: [Prescription Monitoring Program Login](http://www.in.gov/inspect) or you may visit www.in.gov/inspect and click the INSPECT logo to be taken to the Login page.

Have your username (ex: 1512236) and password ready

INDIANA PRESCRIPTION MONITORING PROGRAM

Welcome to INSPECT PMP, Please Login to Continue

Username: 1234567

Password: [masked]

[Forgot Password?](#)

[Login](#)

If you've lost your password, please use the Forgot Password link above or contact the Administrator at:
Email: inspect@pla.in.gov Phone: (317) 234-4458

Not a member? [Register](#)

LOGIN: Login to the PMP with your username and password.

If you do not know your password, you may reset it by clicking [Forgot Password?](#)

You will be asked to provide your username and the answers to your security questions. If you do not know your username, please email: inspect@pla.in.gov.

INDIANA PRESCRIPTION MONITORING PROGRAM

Welcome, Pharmacy Test

MY ACCOUNT

Notification Data Collection

Home Test Run Upload

Other Links File Upload

Info Center Upload Pharmacy Diskettes

FAQ Upload Pharmacy Zero Report

Latest News Manual Entry

Practitioner Self-Lookup

Is now available to all

STAY ALERT

Messages

File Rejected Notification...-7/27/2011

File Processed Successfully...-5/24/2011

File Rejected Notification...-5/21/2011

Backlog records now processed...-5/16/2011

Click here to view all Messages

Requests

No New Announcements

Click here to view all Requests

ZERO REPORTING:

Click the **Data Collection** tab in the upper left corner, and then click **Upload Pharmacy Zero Report**.

INDIANA PRESCRIPTION MONITORING PROGRAM

Welcome, Pharmacy Test

MY ACCOUNT

LOGOUT

Home > Data Collection > Upload Pharmacy Zero Report

Test Run Upload

File Upload

Upload Pharmacy Diskettes

Upload Pharmacy Zero Report

Manual Entry

Other Links

Info Center

FAQ

Latest News

Submit & View Zero Reports

Submit Report View Submitted Reports

Pharmacy Name: Test Pharmacy

NABP#: 1234567

From Report Period: 09/01/2011

To Report Period: 10/01/2011

[Submit](#)

Enter the facility name and NABP number that you wish to report zero controlled substance dispensations on behalf of.

Enter in the date range that you would like to report zero for.

Click **"Submit"** when you are finished to upload your zero report. You will see a message that says the Zero Report has been submitted successfully.

You may view previously submitted zero reports by clicking the **View Submitted Reports** tab to the right of the **Submit Report** tab on that same screen.

Please email inspect@pla.in.gov if you have any questions.